



Flex Technologies, Inc.
P.O. Box 400, Gundy Drive
Midvale, Ohio 44653
(740) 922-5992

Remit payment to:

Flex Technologies, Inc.
Dept. L - 1259
Columbus, Ohio 43260-1259
Duns: 004535282

**108 BRATTONTOWN CIRCLE
LAFAYETTE, TENNESSEE 37083-0626
(DUNS: 147645162)
PHONE: (615) 666-6677**

NO. 619776

SID 619776
0340470

Invoice Date: 9/19/05

Q12102020

Ship Date: 9/19/05

94 / 100 / 100%

SOLD TO:

SHIPPED TO

DELPAL DELCO ELECTRONIC SYSTEMS
ONE LUMINAIRTE CENTER

DELFETI DELCO
601 JIQUAUN UPHAZIS ROAD

KOKUBU, ENDITAMA

46994

Zimmer

Cust. I.D. #1111111111111111

LDS TITHES, TX

Ship I.D. # 100000000000000

CUST. ORD. NO. SLSMN. F.O.B. SHIPPED VIA PLANT TERMS
550446155

FINANCE CHARGE of 1.5% per month on accounts 30 days or more past due.

THE MERCHANDISE LISTED ABOVE HAS BEEN PRODUCED IN ACCORDANCE
WITH THE FAIR LABOR STANDARDS ACT OF 1938, AS AMENDED

ORIGINAL INVOICE

5/9

1-800-CALL-BAX
FOR INFORMATION OR TO
BAX OFFICE NEAREST YOU

DATE <i>4/9/05</i>	ORIGIN RNA	DESTINATION []
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SHIPPER'S REFERENCE NO.
421636130

COMPANY FLEX TECHNOLOGIES	DEPT./FLOOR
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FROM (YOUR NAME) <i>TechMorgan (6/5) TechCo (6/6/07)</i>	PHONE NO.
STREET ADDRESS 100 BRATTONTOWN CIR	
CITY LAFAYETTE	STATE IN
ZIP (REQUIRED) 37003	

BILLING INFORMATION

<input type="checkbox"/> PREPAID (SHIPPER) \$	<input type="checkbox"/> CASH RECEIVED (PAID IN ADVANCE)
<input checked="" type="checkbox"/> COLLECT (CONSIGNEE) RATE QUOTE NUMBER	
<input type="checkbox"/> 3RD PARTY (ACCT. NO. REQ'D.)	

ACCOUNT NO. [REDACTED]

COMPANY NAME [REDACTED]

C.O.D. BAX GLOBAL WILL COLLECT CONSIGNEE'S CHECK MADE PAYABLE ONLY TO THE SHIPPER FOR THE VALUE OF THE GOODS IN THE AMOUNT SHOWN.

AIRBILL NUMBER **686 072 866****HANDLING INFORMATION (* SPECIAL RATE MAY APPLY)**

<input type="checkbox"/> HOLD AT BAX	<input type="checkbox"/> DANGEROUS GOODS	<input type="checkbox"/> SATURDAY DELIVERY	<input type="checkbox"/> SPECIAL DELIVERY	<input type="checkbox"/> CONVENTION
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SPECIAL INSTRUCTIONS / ADDITIONAL REFERENCE INFORMATION:

RMK 1

RMK 2

NO. OF PCS.	WEIGHT	LENGTH	WIDTH	HEIGHT	DESCRIPTION
1	54.3	51	14	14	14
1	4.3	11	11	11	11
1	1.1	1.1	1.1	1.1	1.1
TOTAL PCS.	TOTAL WT.	REWEIGH			SKID(S) SAID TO CONTAIN NO. OF PIECES
1	59.7				1 NO. OF PIECES

RELEASE
SIGNATURE *X*(SENDER AUTHORIZES BAX TO DELIVER SHIPMENT WITHOUT A
DELIVERY SIGNATURE AS PER CONDITIONS ON REVERSE OF THIS PAGE.)**FOR BAX GLOBAL USE ONLY**

RECEIVED BY BAX AT <input type="checkbox"/> SHIPPER'S DOOR <input type="checkbox"/> BAX TERMINAL	OUTSIDE CARRIER: \$	CHARGES ADVANCED	PRO NUMBER	CARRIER NAME
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I certify that this cargo does not contain any unauthorized explosives, incendiaries or hazardous materials. I consent to a search of this cargo. I am aware that this endorsement and original signature, along with other shipping documents, will be retained on file for at least thirty days.

SHIPPER / REPRESENTATIVE SIGNATURE: SIGN NAME *TechMorgan*PRINT NAME *TechMorgan*

DATE

Driver Signature: *[Signature]*Print Name: *TechMorgan*Pick Up Time: *10:00 AM*Driver No. *[REDACTED]*

Shipper must sign this bill and produce the proper identification. One government issued photo ID is acceptable. If this cannot be furnished, the FAA requires 2 forms of ID, one of which must be government-issued, non-photo.

Non Negotiable Airbill

Conditions of Carriage On Reverse Side

1st personal ID reviewed:

appearing on ID YES NO

2nd personal ID reviewed:

appearing on ID YES NO(IN ORDER TO EXPEDITE, SHIPMENT MAY BE DIVERTED TO MOTOR OR OTHER CARRIER AS PER TARIFF RULE UNLESS SHIPPER GIVES OTHER INSTRUCTIONS HEREON.)
NON NEGOTIABLE AIRBILL SUBJECT TO TERMS AND CONDITIONS OF CONTRACT ON REVERSE SIDE.

SHIPPER COPY



Flex Technologies, Inc.
 P.O. Box 400, Gundy Drive
 Midvale, Ohio 44653
 (740) 922-5992

Remit payment to:

Flex Technologies, Inc.
 Dept. L - 1259
 Columbus, Ohio 43260-1259
 Duns: 004535282

**108 BRATTONTOWN CIRCLE
 LAFAYETTE, TENNESSEE 37083-0626**
(DUNS: 147645162)
PHONE: (615) 666-6677

NO. 619789
 05-44481-Add

Invoice Date: 07/21/05

Ship Date: 07/21/05

SOLD TO:

DELPHI DELCO ELECTRONIC SYSTEMS
 THE CORPORATE CENTER

/y

SHIPPED TO:

DELPHI DELCO
 600 JUAGUTIN CAVAZOS ROAD

KOKOMO, INDIANA

46904

LOS INDIOS, TX

LJ

78567

Cust. I.D. # 200217 415

Ship I.D. # 0000017 004

CUST. ORD. NO.	SLSMN.	F.O.B.	SHIPPED VIA	PLANT	TERMS
550063155		Lafayette	BNAF	60	

QUANTITY SHIPPED	DESCRIPTION OR PART NO.	NO. OF CARTONS	WEIGHT	UNIT PRICE	AMOUNT
1470	28012647 550063155 TIME TABLE	7		.64400	946.68
20310	28012648 550063155 TIME TABLE	1.1	TM # 288	.76900	1776.59

*Bnaf Airkill no
 686 072 870*

*Flex Technologies
 SEP 23 2005
 Midvale, Ohio
 PAY THIS AMOUNT*

2723.47

FINANCE CHARGE of 1.5% per month on
 accounts 30 days or more past due.
 ANNUAL PERCENTAGE RATE OF 18%.

THE MERCHANDISE LISTED ABOVE HAS BEEN PRODUCED IN ACCORDANCE
 WITH THE FAIR LABOR STANDARDS ACT OF 1938, AS AMENDED.

ORIGINAL INVOICE

519

DATE	ORIGIN	DESTINATION
7/21/07	BNA	

SHIPPER'S REFERENCE NO.	SHIPPER'S ACCOUNT NO.
► (0481089)	421626120
COMPANY	DEPT./FLOOR
FLEX TECHNOLOGIES	

FROM (YOUR NAME) *John M. Morgan (615) 666-7777*
 STREET ADDRESS *106 BRATTONTOWN CIR*
 CITY *LAFAYETTE* STATE *IN* ZIP (REQUIRED) *37083*

BILLING INFORMATION	
<input type="checkbox"/> PREPAID (SHIPPER)	\$ <input type="checkbox"/> CASH RECEIVED (PAID IN ADVANCE)
<input checked="" type="checkbox"/> COLLECT (CONSIGNEE)	RATE QUOTE NUMBER <input type="text"/>
<input type="checkbox"/> 3RD PARTY (ACCT. NO. REQ'D.)	
ACCOUNT NO. <input type="text"/>	
COMPANY/NAME <input type="text"/>	
C.O.D. <input type="checkbox"/> \$ <input type="text"/> <p>BAX GLOBAL WILL COLLECT CONSIGNEE'S CHECK MADE PAYABLE ONLY TO THE SHIPPER FOR THE VALUE OF THE GOODS IN THE AMOUNT SHOWN.</p>	

AIRBILL NUMBER **686 072 870**

HANDLING INFORMATION (* SPECIAL RATE MAY APPLY)				
<input type="checkbox"/> HOLD AT BAX	<input type="checkbox"/> 'DANGEROUS GOODS	<input type="checkbox"/> 'SATURDAY DELIVERY	<input type="checkbox"/> 'SPECIAL DELIVERY	<input type="checkbox"/> 'CONVENTION
SPECIAL INSTRUCTIONS / ADDITIONAL REFERENCE INFORMATION:				
RMK 1				
RMK 2				
NO. OF PCS.	WEIGHT	LENGTH	WIDTH	HEIGHT
111	2188	150	10	48
111	2188	150	10	48
TOTAL PCS.	TOTAL WT.	REWEIGH	DESCRIPTION	
111	2188	150	1st piece 28012617-14750c 2nd piece 28012617-2310c	
SKID(S) SAID TO CONTAIN 18 NO. OF PIECES				
RELEASE SIGNATURE X (SENDER AUTHORIZES BAX TO DELIVER SHIPMENT WITHOUT A DELIVERY SIGNATURE AS PER CONDITIONS ON REVERSE OF THIS PAGE.)				
DECLARED VALUE \$ <input type="text"/>				
RECEIVED BY BAX AT <input type="checkbox"/> SHIPPER'S DOOR <input type="checkbox"/> BAX TERMINAL				
OUTSIDE CARRIER: <input type="checkbox"/>				
CHARGES ADVANCED \$ <input type="text"/>				
PRO NUMBER <input type="text"/>				
CARRIER NAME <input type="text"/>				

► I certify that this cargo does not contain any unauthorized explosives, incendiaries or hazardous materials. I consent to a search of this cargo. I am aware that this endorsement and original signature, along with other shipping documents, will be retained on file for at least thirty days.

SHIPPER / REPRESENTATIVE SIGNATURE: SIGN NAME X *John M. Morgan*

PRINT NAME X *John M. Morgan*

DATE *7/21/07*

RECEIVED BY BAX GLOBAL DRIVER / AGENT	
Driver Signature: <i>John M. Morgan</i>	Shipper must sign this bill and produce the proper identification. One government issued photo ID is acceptable. If this cannot be furnished, the FAA requires 2 forms of ID, one of which must be government-issued, non-photo.
Print Name: <i>John M. Morgan</i>	
Pick Up Date: <i>7/21/07</i>	Pick Up Time: <i>2:00P</i> Driver No. <input type="text"/>

Limit of Liability: LIABILITY IS AGREED AND UNDERSTOOD TO BE \$50.00 OR \$50 PER POUND, WHICHEVER IS GREATER, UNLESS A HIGHER VALUE IS DECLARED AND APPLICABLE CHARGES MADE. SEE REVERSE SIDE OF AIRBILL PARAGRAPH 4 FOR DECLARED VALUE LIMITATIONS.

Non Negotiable Airbill
Conditions of Carriage On Reverse Side

1st personal ID reviewed:

appearing on ID YES NO

2nd personal ID reviewed:

appearing on ID YES NO

(IN ORDER TO EXPEDITE, SHIPMENT MAY BE DIVERTED TO MOTOR OR OTHER CARRIER AS PER TARIFF RULE UNLESS SHIPPER GIVES OTHER INSTRUCTIONS HEREON.)

IP 102 (04-04)

NON-NEGOTIABLE AIRBILL SUBJECT TO TERMS AND CONDITIONS OF CONTRACT ON REVERSE SIDE.

SHIPPER COPY

SERVICE REQUESTED
GUARANTEED SERVICE

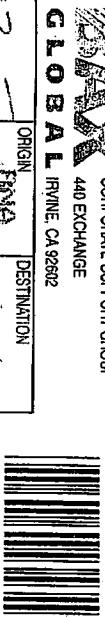
CALL YOUR LOCAL BAX STATION

- Guaranteed First Arrival (EMR 1)
- Guaranteed Overnight (EMR 2)
- Guaranteed Airport-to-Airport (EMR 3)
- Guaranteed 2nd Day (ER2 D)
-

STANDARD SERVICE

- OVERNIGHT (NEXT BUSINESS DAY)
- SECOND DAY
- BAX SAVER
- NEXT FLIGHT AVAILABLE
- OTHER

BAX CORPORATE SUPPORT GROUP
440 EXCHANGE
GLOBAL IRVINE, CA 92602



b8b 072 881

1-800-CALL-BAX
FOR INFORMATION OR THE
BAX OFFICE NEAREST YOU

DATE 07/19/93	ORIGIN IRVINE	DESTINATION
SHIPPERS REFERENCE NO.	SHIPPER'S ACCOUNT NO. 42635139	
COMPANY TEK TECHNOLOGIES	DEPT/FLOOR	AIRBILL NUMBER
FROM (YOUR NAME) John C. M. (CJM) Ladd	PHONE NO. 617-611-1111	CONSIGNEE'S REFERENCE NO.
STREET ADDRESS 0000 BAX INTERMODAL CIR	TO (CONSIGNEE NAME) Delphi Delco	CONSIGNEE'S ACCOUNT NO.
CITY Irvington	PHONE NO.	SERVICE REQUESTED
STATE NY	CITY Irvington	GUARANTEED SERVICES CALL YOUR LOCAL BAX STATION
ZIP (REQUIRED) 33003	STATE NY	<input type="checkbox"/> Guaranteed First Arrival (EMR 1)
	ZIP (REQUIRED) 78567	<input type="checkbox"/> Guaranteed Overnight (EMR 2)
		<input type="checkbox"/> Guaranteed Airport-to-Airport (EMR 3)

BILLING INFORMATION

PREPAID
(SHIPPER) \$ CASH RECEIVED PAY IN ADVANCE

HOLD AT BAX 'DANGEROUS' GOODS SATURDAY DELIVERY SPECIAL DELIVERY CONVENTION

STANDARD SERVICES
OVERNIGHT (NEXT BUSINESS DAY) SECOND DAY

BAX SAVER

NEXT FLIGHT

AVAILABLE

OTHER



Flex Technologies, Inc.
P.O. Box 400, Gundy Drive
Midvale, Ohio 44653
(740) 922-5992

Remit payment to:
Flex Technologies, Inc.
Dept. L - 1259
Columbus, Ohio 43260-1259
Duns: 004535282

**108 BRATTONTOWN CIRCLE
LAFAYETTE, TENNESSEE 37083-0626
(DUNS: 147645162)
PHONE: (615) 666-6677**

NO. 619815

Invoice Date: 9/26/05

9/16/10

Ship Date: 9/26/05

9/26/05

SOLD TO:

DELPHI DELCO ELECTRONICS SYSTEMS
LINE CARD CENTER

西雅图，1997年 46分钟

Cust. I.D. # 2000617 141

SHIPPED TO:

DELPHI RELCO
601 JOSEPHINE CARRIZOSA RD NW

LOS INDIOS, TX 78567

71

⑨. # 187-187-7 ~~187~~ 187

CUST. ORD. NO. 1000000000	SLSMN.	F.O.B. Lafayette	SHIPPED VIA BNMF	PLANT G2	TERMS
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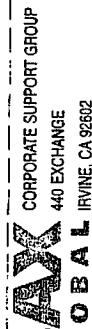
QUANTITY SHIPPED	DESCRIPTION OR PART NO.	NO. OF CARTONS	WEIGHT	UNIT PRICE	AMOUNT
1440	28012647 28012648	4	644.00	540.96	
1470	28012647 28012648	7	769.92	1130.43	
			Tm 187#		
	Bnaf Airbill no 218 148 626				
	Bnaf Conf #7426721				
				Flex Technologies	
				SEP 28 2005	
				Midvale, Ohio	
			PAY THIS AMOUNT	1671.59	

FINANCE CHARGE of 1.5% per month on
accounts 30 days or more past due.
ANNUAL PERCENTAGE RATE OF 18%.

THE MERCHANDISE LISTED ABOVE HAS BEEN PRODUCED IN ACCORDANCE
WITH THE FAIR LABOR STANDARDS ACT OF 1938, AS AMENDED.

ORIGINAL INVOICE

S|9



CORPORATE SUPPORT GROUP
440 EXCHANGE
IRVINE, CA 92650

001 001

SHIPPER'S REFERENCE NO.		DEST. SORT CODE	AIRBILL NUMBER	CONSIGNEE'S REFERENCE NO.	CONSIGNEE'S ACCOUNT NO.	SERVICE REQUESTED
ATE:	ORIGIN	DEPT./FLOOR	COMPANY	TO (CONSIGNEE NAME)	DEPT./FLOOR	GUARANTEED SERVICES
COMPANY	NAME	PHONE NO.		ACCURATE STREET ADDRESS (BAX CANNOT DELIVER TO A P.O. BOX)	PHONE NO.	CALL YOUR LOCAL BAX STATION
RETE ADDRESS	TOM (YOUR NAME)	FAX				<input type="checkbox"/> Guaranteed First Arrival (EMR 1)
103 BRATTONTOWN CIR	John M. Holley	310-265-1130				<input type="checkbox"/> Overnight (EMR 2)
LAFAYETTE	STATE	ZIP (REQUIRED)	CITY	ZIP (REQUIRED)	STATE	<input type="checkbox"/> Guaranteed Airport-to-Airport (EMR 3)
	CA	37063	Lafayette	94539	CA	<input type="checkbox"/> Guaranteed 2nd Day (EMR D)
						<input type="checkbox"/> 2nd Day (EMR D)
HANDLING INFORMATION (* SPECIAL RATE MAY APPLY)						
SPECIAL INSTRUCTIONS / ADDITIONAL REFERENCE INFORMATION:						
<input type="checkbox"/> HOLD	<input type="checkbox"/> DANGEROUS	<input type="checkbox"/> SATURDAY	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> CONVENTION		
<input type="checkbox"/> AT BAX	<input type="checkbox"/> GOODS	<input type="checkbox"/> DELIVERY	<input type="checkbox"/> DELIVERY	<input type="checkbox"/> CONVENTION		
BILLING INFORMATION						
CASH RECEIVED (PAID IN ADVANCE)						
<input type="checkbox"/> PREPAID (SHIPPER)	\$	SRD(S) SAID TO CONTAIN				
(SENDER AUTHORIZES BAX TO DELIVER SHIPMENT WITHOUT A DELIVERY SIGNATURE AS PER CONDITIONS ON REVERSE OF THIS PAGE.)						
RELEASE X						
SIGNATURE X						
DECLARED VALUE						
\$		RECEIVED BY BAX AT	OUTSIDE CARRIER:	CHARGES ADVANCED	PRO NUMBER	CARRIER NAME
\$		<input type="checkbox"/> SHIPPER'S DOOR	<input type="checkbox"/> BAX TERMINAL	\$		
LIMIT LIABILITY						
BAX CONSIGNEE'S CHECK MADE PAYABLE ONLY TO THE SHIPPER FOR THE VALUE OF THE GOODS IN THE AMOUNT SHOWN.						
I certify that this cargo does not contain any unauthorized explosives, incendiaries or hazardous materials. I consent to a search of this cargo. I am aware that this endorsement and original signature, along with other shipping documents, will be retained on file for at least thirty days.						
SHIPPER / REPRESENTATIVE SIGNATURE: SIGN NAME X						
PRINT NAME X						
DATE 6/26/07						
RECEIVED BY BAX GLOBAL DRIVER / AGENT						
1st personal ID reviewed:						
Ver Signature: <i>J. T. J. Holley</i>	Int Name: <i>J. T. J. Holley</i>	Time: <i>1:35</i>	# appearing on ID	Matched photo on ID?		
2nd personal ID reviewed:						
# appearing on ID Matched photo on ID?						
Conditions of Carriage On Reverse Side						
IN ORDER TO EXPEDITE, SHIPMENT MAY BE DIVERTED TO MOTOR OR OTHER CARRIER AS PER TARIFF RULE UNLESS SHIPPER GIVES OTHER INSTRUCTIONS HEREON.)						